

DATE FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRORATION OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Superseded by OIL C-104 and C-110
Effective 1-1-65

Operator
Hanson Operating Company, Inc.
Address
P. O. Box 1515, Roswell, New Mexico 88201
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Completion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) Effective July 1, 1982,
Change Operator Name from:
Hanson Oil Corporation
P. O. Box 1515, Roswell, New Mexico 88201

change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name: Mattern
Well No.: 2
Pool Name, including Formation: Blinbry
Kind of Lease: State, Federal or Fee Fee
Lease No.:
Location:
Unit Letter: K : 1980 Feet From The South Line and 1783 Feet From The West
Line of Section: 30 Township: 21-S Range: 37-E NEELS Len County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corporation
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1183 - Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Warren Petroleum, Co.
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1589 - Tulsa, OK 74102
Well produces oil or liquids, give location of tanks:
Unit: K Sec: 30 Twp: 21-S Rge: 37-E Is gas currently marketed? Yes When

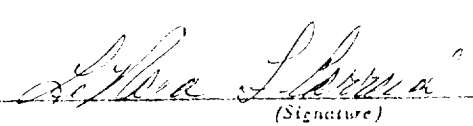
this production is commingled with that from any other lease or pool, give commingling order number

COMPLETION DATA
Designate Type of Completion - (X)
Oil Well Gas Well New Well Lost Circulation Deepen Plug Back Same Reels Other Reels
Date Spudded Date Compl. Ready to Prod. Total Depth F.B.T.D.
Locations (DE, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lost oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)
Oil Well
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Casing Size
Crust Prod. During Test Oil-DBls. Water-DBls. Gas-MCF

AS WELL
Crust Prod. Test-MCF/D Length of Test DBls. Condensate/MMCF Gravity of Condensate
Testing Method (pilot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Casing Size

CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Production Analyst

OIL CONSERVATION COMMISSION
APPROVED JUL 23 1982
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT 1 MANAGER
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allow-

RECEIVED

JUN 28 1982

HOBBS OFFICE